# **SOURCES OF DATA**

Information on births and deaths is compiled from the original documents (i.e., certificates of live births and certificates of death) filed with the Arizona Department of Health Services. Information on induced terminations of pregnancy (abortions) performed on Arizona women is compiled from reports sent to the Arizona Department of Health Services by facilities within but not outside the state.

Pregnancies are the sum of live births, spontaneous terminations of pregnancy (fetal deaths or still births) and induced terminations of pregnancy (abortions).

Data on morbidity, levels of disease and disability in the population, are obtained for certain infectious diseases that must be reported by law. The ADHS Epidemiology and Disease Control Services conducts surveillance and monitoring of these reportable diseases and provided data for section 9 in this report.

Population denominators by ethnic group, used to calculate rates for 1997 are from the U.S. Bureau of the Census (*Detailed State Projection Data Files: 1995 to 2025*), available on the Web at <a href="http://www.census.gov/population/www/projections/stproj.html">http://www.census.gov/population/www/projections/stproj.html</a>.

Almost all figures are based on rates and ratios published in the 1997 *Arizona Health Status and Vital Statistics* annual report.

# **DEFINITIONS**

# Terms Related to Reproductive Health

**ABORTION RATE** - NUMBER OF REPORTED ABORTIONS TO FEMALES OF ALL AGES DURING A CALENDAR YEAR PER 1,000 FEMALES OF CHILDBEARING AGE (15-44 YEARS).

**ABORTION RATIO** - NUMBER OF ABORTIONS REPORTED DURING A PERIOD PER 1,000 LIVE BIRTHS OCCURRING DURING THE SAME PERIOD.

BIRTH OR LIVE BIRTH - THE COMPLETE EXPULSION OR EXTRACTION FROM ITS MOTHER OF A PRODUCT OF HUMAN CONCEPTION, IRRESPECTIVE OF THE DURATION OF PREGNANCY WHICH, AFTER SUCH EXPULSION OR EXTRACTION, BREATHS OR SHOWS ANY OTHER EVIDENCE OF LIFE SUCH AS BEATING OF THE HEART, PULSATION OF THE UMBILICAL CORD, OR DEFINITE MOVEMENT OF VOLUNTARY MUSCLES, WHETHER OR NOT THE UMBILICAL CORD HAS BEEN CUT OR THE PLACENTA IS ATTACHED.

**BIRTH WEIGHT** - THE WEIGHT OF A NEONATE DETERMINED IMMEDIATELY AFTER DELIVERY OR AS SOON THEREAFTER AS POSSIBLE.

**INFANT DEATH -** ANY DEATH AT ANY TIME FROM BIRTH UP TO, BUT NOT INCLUDING, THE FIRST YEAR OF AGE (364 DAYS, 23 HOURS, 59 MINUTES FROM THE MOMENT OF BIRTH).

**LOW-BIRTHWEIGHT** - PRIOR TO 1990: ANY NEONATE WHOSE WEIGHT AT BIRTH IS 2,500 GRAMS OR LESS. BEGINNING IN 1990: ANY NEONATE WEIGHING LESS THAN 2,500 GRAMS AT BIRTH (LESS THAN 5 POUNDS 8 OUNCES).

**NEONATAL DEATH** - DEATH OF A LIVEBORN NEONATE BEFORE THE NEONATE BECOMES 28 DAYS OLD (UP TO AND INCLUDING 27 DAYS, 23 HOURS, 59 MINUTES FROM THE MOMENT OF BIRTH).

**POSTNEONATAL DEATH** - ANY DEATH OF A LIVEBORN INFANT AT LEAST 28 DAYS OF AGE BUT UNDER ONE YEAR OF AGE.

**VERY LOW-BIRTHWEIGHT** - ANY NEONATE WHOSE WEIGHT AT BIRTH IS 1,500 GRAMS OR LESS (LESS THAN 3 POUNDS 5 OUNCES).

### TERMS RELATED TO MORTALITY

AGE-ADJUSTED MORTALITY RATES - BECAUSE MORTALITY FROM MOST CAUSES OF DEATH OCCURS PREDOMINATELY AMONG THE ELDERLY, A POPULATION GROUP WITH A LARGER PROPORTION OF OLDER PERSONS WOULD HAVE A HIGHER MORTALITY RATE. THE "AGE-ADJUSTMENT" REMOVES THE EFFECT OF THE AGE DIFFERENCES AMONG SUB-POPULATIONS BY PLACING THEM ALL IN A POPULATION WITH A STANDARD AGE DISTRIBUTION.

AGE-SPECIFIC MORTALITY - NUMBER OF DEATHS IN A SPECIFIC AGE GROUP DURING A CALENDAR YEAR.

**CAUSE OF DEATH** - FOR THE PURPOSE OF NATIONAL MORTALITY STATISTICS, EVERY DEATH IS ATTRIBUTED TO ONE UNDERLYING CONDITION, BASED ON INFORMATION REPORTED ON THE DEATH CERTIFICATE AND UTILIZING THE INTERNATIONAL RULES FOR SELECTING THE UNDERLYING CAUSE OF DEATH FROM THE REPORTED CONDITIONS.

CAUSE-SPECIFIC MORTALITY - NUMBER OF DEATHS FROM A SPECIFIED CAUSE DURING A CALENDAR YEAR.

CLASSIFICATION OF CAUSE OF DEATH - THE CAUSE OF DEATH USED IN THIS REPORT IS THE UNDERLYING CAUSE CLASSIFIED ACCORDING TO THE *International Classification of Diseases, Injuries and Causes of Death.* Listed below are categories and International Classification of Diseases (ICD) codes for selected causes of mortality presented in this report.

**ALCOHOLISM**: 291, 303, 571.0-571.3

ALZHEIMER'S DISEASE: 331.0

BREAST CANCER IN WOMEN: 174

CARDIOVASCULAR DISEASE: 390-448

CEREBROVASCULAR DISEASE (STROKE): 430-438

CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD): 490-496

CIRRHOSIS: 571

COLORECTAL CANCER: 153.0-154.3, 154.8, 159.0 CORONARY HEART DISEASE: 410-414, 402, 429.2

**DIABETES MELLITUS: 250** 

**DISEASE OF HEART**: 390-398, 402, 404-429

**DROWNING:** E830, E832, E910

DRUG-RELATED DEATHS: 292, 304, 305.2-305.9, E850-E858, E950.0-E950.5, E962.0, 980.0-

E980.5

FALL-RELATED DEATHS: E880-E888

FIREARM-RELATED DEATHS: E922.0-E922.3, E922.8-E922.9, E955.0-E955.4, E965.0-E965.4,

E970, E985.0-E985.4 HIV INFECTION: 042-044

HOMICIDE AND LEGAL INTERVENTION: E960-E978 INFECTIOUS AND PARASITIC DISEASES: 001-139

INJURIES NOT RELATED TO MOTOR VEHICLES: E800-E807, E826-E949;

Injuries, Unintentional: E800-E949
Malignant Neoplasms (cancers): 140-208
Motor Vehicle-Related Injuries: E810-E825

NEPHRITIS, NEPHROTIC SYNDROME AND NEPHROSIS: 580-589

PNEUMONIA & INFLUENZA: 480-487

SEPTICEMIA: 038 SUICIDE: E950-E959

## Medical Terms Used on the Birth Certificate

#### MEDICAL RISK FACTORS FOR THIS PREGNANCY

**ANEMIA** - HEMOGLOBIN LEVEL OF LESS THAN 10.0 G/DL DURING PREGNANCY, OR HEMATOCRIT OR LESS THAN 30 PERCENT DURING PREGNANCY.

CARDIAC DISEASE - DISEASE OF THE HEART.

ACUTE OR CHRONIC LUNG DISEASE - DISEASE OF THE LUNGS DURING PREGNANCY.

**DIABETES** - METABOLIC DISORDER CHARACTERIZED BY EXCESSIVE DISCHARGE OF URINE AND PERSISTENT THIRST; INCLUDES JUVENILE ONSET, ADULT ONSET, AND GESTATIONAL DIABETES DURING PREGNANCY.

GENITAL HERPES - INFECTION OF THE SKIN OF THE GENITAL AREA BY HERPES SIMPLEX VIRUS.

HYDRAMNIOS/OLIGOHYDRAMNIOS - ANY NOTICEABLE EXCESS (HYDRAMNIOS) OR LACK (OLIGOHYDRAMNIOS) OF AMNIOTIC FLUID.

**HEMOGLOBINOPATHY** - A BLOOD DISORDER CAUSED BY ALTERATION IN THE GENETICALLY DETERMINED MOLECULAR STRUCTURE OF HEMOGLOBIN (FOR EXAMPLE, SICKLE CELL ANEMIA).

**HYPERTENSION, CHRONIC** - BLOOD PRESSURE PERSISTENTLY GREATER THAN 140/90, DIAGNOSED PRIOR TO ONSET OF PREGNANCY OR BEFORE THE 20TH WEEK OF GESTATION.

**HYPERTENSION, PREGNANCY-ASSOCIATED** - AN INCREASE IN BLOOD PRESSURE OF AT LEAST 30 MM HG SYSTOLIC OR 15 MM HG DIASTOLIC ON TWO MEASUREMENTS TAKEN 6 HOURS APART AFTER THE 20TH WEEK OF GESTATION.

**ECLAMPSIA** - THE OCCURRENCE OF CONVULSIONS AND/OR COMA UNRELATED TO OTHER CEREBRAL CONDITIONS IN WOMEN WITH SIGNS AND SYMPTOMS OF PREECLAMPSIA.

INCOMPETENT CERVIX - CHARACTERIZED BY PAINLESS DILATION OF THE CERVIX IN THE SECOND TRIMESTER OR EARLY IN THE THIRD TRIMESTER OF PREGNANCY, WITH PREMATURE EXPULSION OF MEMBRANES THOUGH CERVIX AND BALLOONING OF THE MEMBRANES INTO VAGINA, FOLLOWED BY RUPTURE OF THE MEMBRANE AND SUBSEQUENT EXPULSION OF THE FETUS.

**PREVIOUS INFANT 4,000+ GRAMS** - THE BIRTHWEIGHT OF A PREVIOUS LIVE-BORN CHILD WAS OVER 4,000 GRAMS (8LBS.14oz.).

PREVIOUS PRETERM OR SMALL-FOR-GESTATIONAL-AGE-INFANT -PREVIOUS BIRTH OF AN INFANT PRIOR TO TERM (BEFORE 37 COMPLETED WEEKS OF GESTATION) OR OF AN INFANT WEIGHING LESS THAN THE 10TH PERCENTILE FOR GESTATIONAL AGE USING A STANDARD WEIGHT FOR AGE CHART.

RENAL DISEASE - KIDNEY DISEASE.

**RH SENSITIZATION** - THE PROCESS OR STATE OF BECOMING SENSITIZED TO THE RH FACTOR AS WHEN AN RH-NEGATIVE WOMAN IS PREGNANT WITH AN RH-POSITIVE FETUS.

**UTERINE BLEEDING** - ANY CLINICALLY SIGNIFICANT BLEEDING DURING THE PREGNANCY TAKING INTO CONSIDERATION THE STAGE OF PREGNANCY; ANY SECOND OR THIRD TRIMESTER BLEEDING OR THIRD TRIMESTER BLEEDING OF THE UTERUS PRIOR TO THE ONSET OF LABOR.

#### COMPLICATIONS OF LABOR AND/OR DELIVERY

**FEBRILE -** A FEVER GREATER THAN 100 DEGREES F. OR 38 C. OCCURRING DURING LABOR AND/OR DELIVERY.

**MECONIUM, MODERATE/HEAVY** - MECONIUM CONSISTS OF UNDIGESTED DEBRIS FROM SWALLOWED AMNIOTIC FLUID, VARIOUS PRODUCTS OF SECRETION AND SHEDDING BY THE GASTROINTESTINAL TRACT, MODERATE TO HEAVY AMOUNTS OF MECONIUM IN THE AMNIOTIC FLUID NOTED DURING LABOR AND/OR DELIVERY.

**MECONIUM ASPIRATION SYNDROME** - ASPIRATION OF MECONIUM BY THE FETUS OR NEWBORN, AFFECTING THE LOWER RESPIRATORY SYSTEM.

**ASSISTED VENTILATION (LESS THAN 30 MINUTES)-** A MECHANICAL METHOD OF ASSISTING RESPIRATION FOR NEWBORNS WITH RESPIRATORY FAILURE.

**PREMATURE OF MEMBRANES (MORE THAN 12 HOURS)**- RUPTURE OF MEMBRANES AT ANY TIME DURING PREGNANCY AND MORE THAN 12 HOURS BEFORE THE ONSET OF LABOR.

**ABRUPTIO PLACENTA - PREMATURE SEPARATION OF NORMALLY IMPLANTED PLACENTA FROM THE UTERUS.** 

PLACENTA PREVIA - IMPLANTATION OF THE PLACENTA OVER OR NEAR THE INTERNAL OPENING OF THE CERVIX.

**OTHER EXCESSIVE BLEEDING** - THE LOSS OF SIGNIFICANT AMOUNT OF BLOOD FROM CONDITIONS OTHER THAN ABRUPTIO PLACENTA OR PLACENTA PREVIA.

SEIZURES DURING LABOR - MATERNAL SEIZURES OCCURRING DURING LABOR FROM ANY CAUSE.

#### ABNORMAL CONDITIONS OF THE NEWBORN

ANEMIA- HEMOGLOBIN LEVEL OF LESS THAN 13.0 G/DL, OR A HEMATOCRIT OF LESS THAN 39 PERCENT.

**BIRTH INJURY** - IMPAIRMENT OF THE INFANT'S BODY FUNCTION OR STRUCTURE DUE TO ADVERSE INFLUENCES THAT OCCURRED AT BIRTH.

**FETAL ALCOHOL SYNDROME** - A SYNDROME OF ALTERED PRENATAL GROWTH AND DEVELOPMENT OCCURRING IN INFANTS BORN OF WOMEN WHO CONSUMED EXCESSIVE AMOUNTS OF ALCOHOL DURING PREGNANCY.

**HYALINE MEMBRANE DISEASE/RDS** - A DISORDER PRIMARILY OF PREMATURITY, MANIFESTED CLINICALLY BY RESPIRATORY DISTRESS AND PATHOLOGICALLY BY PULMONARY HYALINE MEMBRANES AND INCOMPLETE EXPANSION OF THE LUNGS AT BIRTH.

Assisted ventilation (30 minutes or more) - Newborn placed on assisted ventilation for 30 minutes or longer.

**SEIZURES** - A SEIZURE OF ANY ETIOLOGY.